## **Book Reviews**

The Western Journal of Medicine does not review all books sent by publishers, although information about new books received is printed elsewhere in the journal as space permits. Prices quoted are those given by the publishers.

VITAMINS AND 'HEALTH' FOODS: The Great American Hustle—Victor Herbert, MD, JD, Professor of Medicine, State University of New York, Downstate Medical Center, Chief, Hematology and Nutrition Laboratory, Bronx VA Medical Center, and Stephen Barrett, MD, Chairman, Board of Directors, Lehigh Valley Committee Against Health Fraud, Inc. George F. Stickley Company, 210 West Washington Square, Philadelphia, PA 19106, 1981. 189 pages, \$11.95.

This is the latest in a series of books on health fakery and quackery, edited by America's prime quack-kicker, Stephen Barrett, MD. This one is written by Victor Herbert, MD, JD, professor of medicine at New York University. His knowledge of nutrition quackery is encyclopedic.

The book is an up-to-date exposé of so-called "health food" quacks, their organizations, marketing techniques and economic and political methods of bamboozling the public while staying just within the law, and sometimes outside of it.

Herbert and Barrett present the misrepresentation of vitamins and so-called health foods and supplements as a serious national problem. There seems to be no field wherein so much misinformation has so much public tolerance.

They present many hard-hitting facts. For instance, Shaklee, of the food products company, was a chiropractor. He and his two sons owned \$62 million in stock in their company as of 1980. Herbert discusses the company's marketing techniques. Robert Atkins, MD, (the Atkins' Diet), is said to promote vitamins as being more effective than medications against disease. "Dr" Carlton Frederick (not his real name) has a degree in communication and no significant training in nutrition. Yet, he is worshipped as America's number one nutrition authority and was once convicted of practicing medicine without a license. The list goes on and on.

Herbert shows how the National Nutritional Foods Association advises "health food" store proprietors on avoiding Food and Drug Administration regulations on false labeling; how to give nutritional advice without appearing to prescribe; how to get on radio and TV.

Another chapter records illogical and unscientific court and administrative rulings that allow hustling to exist. There is a good section on the dispute over the concept of the terms "organic" and "natural."

There are some defects. For instance, there are five references to "vitamin B<sub>15</sub>," decrying its fraudulent promotion and inconstant contents, but no mention of what its main ingredients usually are (dimethylglycine or dichloroacetate, or both, plus inert materials). Several chapters contain passages taken from Barrett's prior publications—especially *The Health Robbers* (without credits), but there is also updated material that makes the reading worthwhile.

Herbert's previous book *Nutrition Cultism* is a more complete and technical review of clinical and biochemical information. Together with this volume, they make a good pair. Any physician whose patients may be involved in nutrition cults should have these two books for reference. Also buy a copy and donate it to your public library.

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SPORTS MEDICINE: Fitness, Training, Injury—Edited by Otto Appenzeller, MD, PhD, and Ruth Atkinson, MD. Urban & Schwarzenberg, Inc., 7 East Redwood St., Baltimore, MD 21202, 1981. 395 pages, 119 illustrations, \$39.50.

This book was written for medical students enrolled in the sports medicine course at the University of New Mexico School of Medicine. As a text it touches on the entire field of "sports medicine" from exercise physiology to injury management but in a manner obviously designed to support lectures. The sections on the nervous system, nutrition, hormones, fluids and electrolytes, and exercise physiology are well documented literature reviews. Unfortunately most of the authors fail to place the reviewed material in perspective and thus the reader is left with bits and pieces and the task of looking up the references—fine for students but perhaps unrealistic for practicing physicians.

The two chapters (temperature regulation and nutrition) written by the editors are excellent. Not only is the literature thoroughly reviewed but the information is collated into a readable narrative form.

The final section (injuries and locomotion) deals primarily with athletic trauma. Although this section touches on all of the injuries that might occur in sports, those problems that occur on a daily basis are given little more attention than those seen once in a lifetime. In addition there is scant attention paid to the sports-specific injuries that are often the most troublesome to diagnose and manage.

The need for aggressive and knowledgeable rehabilitation is the primary difference between managing athletic injuries and managing garden variety soft tissue trauma. For physicians seeking guidance in this area the book will be of little help. Although the descriptions of diagnostic techniques are somewhat more complete they are still inadequate for a physician not already familiar with the performance of these various tests.

The book would be a good investment for two groups of persons: medical students and practicing physicians desiring a relatively current literature review of those aspects of sports medicine not related to injuries. For physicians seeking assistance in diagnosing athletic injuries or in formulating treatment programs, it offers little.

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DRUGS DURING PREGNANCY: Clinical Perspectives—Raja W. Abdul-Karim, MD: with contributions by Howard J. Osofsky, MD, PhD; Donald R. Mattison, MD, and Roger Scott, JD. George F. Stickley Company, 210 West Washington Square, Philadelphia, PA 19106, 1981, 152 pages, \$15.00.

The thalidomide disaster and the recognition that a number of other drugs such as diphenylhydantoin and sodium warfarin may be human teratogens have emphasized the potential risk of medications in pregnant women. The dilemma is confounded by the fact that the effects of some drugs may not be apparent until years after they are prescribed-for example, the consequences of diethylstilbestrol. Our knowledge of these risks is far from complete and what information there is has often been difficult to obtain. How many of us have been frustrated when using the PDR and finding the statement, "The safe use of this medication in pregnancy has not been established"? In order to evaluate the risks of medications one must not only have an understanding of teratology and principles of drug transfer, but must also have an appreciation for the pitfalls inherent in this type of research. Dr Abdul-Karim has undertaken an ambitious project in his book Drugs During Pregnancy-Clinical Perspectives. Several chapters are devoted to instruction in basic principles of drug transfer and teratology. Approximately half of the book is devoted to discussion of specific medications and an assessment of their influence on pregnancy outcome. There is a chapter on the mechanisms of drug toxicity and a discussion of reproductive toxins with numerous examples, including environmental agents and their influence on reproduction. The book is very readable and provides sufficient background information for those who must deal with these problems.

One may be called upon to obtain information regarding drugs in pregnancy for either of two general purposes. One may wish to prescribe a drug to a patient for a given indication. Frequently, there is more than one suitable drug. An example is a patient who is hypertensive and needs antihypertensive medication. In this instance, the practitioner wishes to find a drug that will be effective in pregnancy and pose the least risk to the mother and fetus. The second reason for desiring information concerning a drug in pregnancy is to counsel patients regarding the risks of drugs that they have already taken or are presently using. Drugs in Pregnancy-Clinical Perspectives would serve the first purpose well but would not be as helpful for the second. This book discusses somewhat over 60 medications and their influence on pregnancy outcome. The medications are discussed by class of drug: anticonvulsants, anticoagulants, antibiotics and so forth.

A number of drugs are conspicuously absent. There is no mention of acetaminophen, metronidazole or sodium warfarin, to mention just a few. It was apparently not the intent of the author to provide a comprehensive discussion of drugs but rather to provide background information and appropriate examples. Another recently published book entitled *Handbook for Prescribing Medications During Pregnancy* by Burkowitz, Coustan and Mochizuki (Little, Brown, and Company, Boston, 1981) lists twice as many drugs and is a very helpful, quick reference book. It, however, has none of the background information of Abdul-Karim's text. I believe that both of these publications should be on the bookshelf of everyone providing care to pregnant women. Though there is some duplication, the books complement each other well.

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MEDICO-LEGAL IMPLICATIONS OF DEATH AND DYING—David W. Meyers. The Lawyers Co-operative Publishing Company, Rochester, NY 14694, and Bancroft-Whitney Company, San Francisco, CA 94107, 1981. 639 pages, \$65.00.

Mr Meyers makes an outstanding contribution to both the medical and legal professions in this latest publication (1981), dealing with a broad range of subjects that regularly are of compelling interest and concern to physicians as well as attorneys.

In treating in-depth topics such as dying, informed consent, standard of care owed to dying patients, orders not to resuscitate and terminating lifesaving treatment for hopeless patients, Mr Meyers confronts directly many of the vexing issues that daily translate into some definitive, discreet action by practicing physicians. The chapters on informed consent and orders not to resuscitate are particularly strong because, in addition to a thorough and lucid discussion of the applicable law and cases, they contain specific instructional protocols that should prove highly useful to medical staffs utilizing them as advisory standards and suggestions. The personal opinions expressed by the author are concise, scholarly and well-buttressed by legal principle and case law. In the sections on terminating lifesaving treatments for hopeless patients, the method for presenting in sequential fashion detailed analyses of pertinent cases such as Quinlan, Eichler and several Massachusetts cases is particularly useful and illuminating in deciphering these parts of the law. By adding those chapters that deal with ethical and religious considerations, Mr Meyers adds a commendable dimension to his efforts, serving to strengthen the entire work.

Although the title *Medico-Legal Implications of Death and Dying* is an appropriate one, there are exceedingly useful discussions on related topics, such as informed consent, that exceed the boundaries suggested by the book's title.

The volume is well constructed, with good print, and the ex-

position is nicely organized, thoroughly annotated and written in refreshingly readable language.

This work, in my opinion, is a very significant addition to our knowledge in this general area. It properly deserves a place in every practicing physician's collection as well as in all medical and legal libraries.

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MNEMONICS, RHETORIC AND POETICS FOR MEDICS—Robert L. Bloomfield, MD, and E. Ted Chandler, MD, Department of Medicine, Bowman Gray School of Medicine, Wake Forest University, Winston-Salem, NC. Harbinger Press, Box 17201, Winston-Salem, NC 27106, 1982. 222 pages, §9.50 (softbound).

Even if Rubik's Cube left you confused, you will enjoy this Bloomfield and Chandler collaboration. Much of medicine is a jumble of facts and associations but these authors have distilled everything from the causes of fecal leukocytes (STUPE) to the signs of spinal compression (SHARP WALL) to Mnemonics, Rhetoric and Poetics for Medicine (MRPM).

Where did they find these? There must be at least 100 or more mnemonics in this book. I searched my library and there it was! I found my old blue book which I compiled as a resident and in there were many of these memory aids. I called my book my "Peripheral Brain" and so this new volume must be a compilation of many such books.

Not only are there memory aids in MRPM but medical sense and sensitivity: "One unfortunate aspect of Crohn's disease is the need for surgery in over two-thirds of patients because of fistula formation, obstruction, or abscesses." Then follows the main indications for surgical intervention in inflammatory bowel disease expressed as an acrostic: I CHOP! (Get it?)

Amongst this alphabetic soup runs a thread of judgment, experience and humor. There is still humor in medicine.

This book could make a splendid gift for a beleagured medical student, compulsive resident or a diligent practitioner (BCD). There is one irony: with such parsimony, why such a weighty, unwieldly and awkward title? MRPM makes no SENSE. Now that's a puzzle!

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LUNG DEVELOPMENT: BIOLOGICAL AND CLINICAL PERSPECTIVES—Volume II: NEONATAL RESPIRATORY DISTRESS—Edited by Philip M. Farrell, Department of Pediatrics, University of Wisconsin Clinical Sciences Center, Madison. Academic Press, Inc., Publishers, 111 Fifth Ave., New York, NY 10003, 1982. 307 pages, \$37.50.

This book is a multiauthored collection of state of the art chapters about various aspects of the respiratory distress syndrome (RDS) of premature infants. Other subject matters covered include bronchopulmonary dysplasia and brief references to other causes of respiratory distress in infants. The book is the clinical volume of a two-volume set; Volume 1, titled Biochemistry and Physiology, will be of interest only to those actively involved in lung-related research. This second volume covers three areas relating to RDS: diagnosis and management of RDS, assessment of fetal lung maturity and prevention of RDS by maternal treatments with corticosteroids. While the book is multiauthored, the style of presentation is consistent throughout and easy to read, and the chapters are complementary and not repetitious. Several chapters should be very useful for any general pediatrician who is occasionally faced with the care of an infant with RDS, while containing sufficient detail and references to maintain the interest of a practicing neonatologist.

Dr Edwards has written a thorough review of the x-ray diagnosis of RDS and related conditions. Drs Gutcher and Perelman use a case study of RDS to illustrate the thought processes used and therapeutic options available to neonatologists when caring for such an infant. This chapter is not a cookbook for care, rather it is a balanced exposition of the various approaches and guidelines that have been published. Drs Tsao and Zachman have written a very thorough and scholarly chapter that analyzes the various tests that have been proposed to assess fetal lung maturation. They have reviewed the results of 10,840